GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:5829
ANSWERED ON:04.05.2005
INFANT GIRL MORTALITY RATE
Kamat Shri Gurudas

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government is aware of the fact that the girl child in India has 50 per cent more chance of dying before attaining the age of five years according to a report of World Health Organisation ;

(b) if so, the reasons therefor; and

(c) the steps taken/proposed to be taken by the Government in this regard?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a)&(b): According to the World Health Report 2005 which has been released by World Health Organization in April, 2005, the under 5 mortality rate for boys is 85 per 100 live births and 90 per 1000 live births for girls. According to the World Bank Report (2004)-`India Attaining the Millennium Development Goals`, a girl in India is 40% more likely to die between her 1st and 5th birthdays than a boy. The report states that low social status of women in India is an important cause of gender disparity in child mortality. Other reasons for higher female child mortality are marked preference for boy children in some communities leading to discrimination against girls such as neglect in feeding, education and health care.

(c): Under the Reproductive & Child Health Programme(RCH) being implemented in all states of the country, various interventions for reduction of infant and child mortality rate are being implemented. These include immunization against fixed vaccine communicable diseases, control of death during diarrhea, control of deaths due to acute respiratory infections; prophylaxis against vitamin A deficiency and iron deficiency anemia. Essential newborn care and promotion of exclusive breastfeeding and appropriate complementary feeding practices.

Specific initiatives which have been undertaken for women empowerment are the contractual appointment of Family welfare staff to increase provisions of healthcare services, increase in compensation for loss of wages for acceptors of sterilization/IUD insertion, increasing the basket of choices to include a long acting Copper T (IUD 380 A) and the emergency contraceptive pill and increased participation of men in planned parenthood. The pre-natal diagnostic techniques (Regulation & Prevention of Misuse) Act 1994 has been implemented with a view to improve the declining sex ration and for containing the menace of female foeticide. The Integrated Population and Development project is under implementation in 6 states i.e. Rajasthan, Orissa, Gujarat, Madhya Pradesh and Kerala with the objectives of increasing the sensitivity of health care workers of all categories on gender and to enhance their capacity for providing gender friendly health care.